2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000002052

Entity Name: MYSTYK RESTAURANT & JUICE BAR, INC.

FILED Apr 17, 2009 Secretary of State

11500 N.E. 2ND AVE. 8470 S.W. 103 ST. MIAMI, FL 33161 MIAMI, FL 33156

Current Mailing Address: New Mailing Address:

8470 SW 103 ST. 8470 S.W. 103 ST. MIAMI, FL 33156 MIAMI, FL 33156

FEI Number: 56-2551689 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 LEE, MARILYN
 2018 NE 164TH STREET
 8470 S.W. 103 ST

 MIAMI, FL 33162 US
 MIAMI, FL 33156 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MARILYN LEE 04/17/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition LEE, MARILYN LEE, MARILYN Name: Name: 8470 S.W. 103 ST. 2018 NE 164TH STREET Address: Address: City-St-Zip: MIAMI, FL 33162 City-St-Zip: MIAMI, FL 33156

Title: D () Delete Title: D (X) Change () Addition
Name: GRIFFITHS ISHAO Name: GRIFFITHS ISHAO

 Name:
 GRIFFITHS, ISHAQ
 Name:
 GRIFFITHS, ISHAQ

 Address:
 2018 NE 164TH STREET
 Address:
 8470 S.W. 103 ST.

 City-St-Zip:
 MIAMI, FL 33162
 City-St-Zip:
 MIAMI, FL 33156

Title: D () Delete Title: D (X) Change () Addition

 Name:
 LEE, JAH-PHIA
 Name:
 LEE, JAH-PHIA

 Address:
 2018 NE 164TH STREET
 Address:
 8470 S.W. 103 ST.

 City-St-Zip:
 MIAMI, FL 33162
 City-St-Zip:
 MIAMI, FL 33156

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ISHAQ GRIFFITHS D 04/17/2009